



Texas Department of Health
Osteoporosis Advisory Committee
Regular Meeting Minutes
February 22, 2002

The Osteoporosis Advisory Committee met on Friday, February 22, 2002, at the Joe C. Thompson Center, Room 2.110; University of Texas at Austin Campus.

Advisory Committee Member(s) Present:

Roma E. Ball, M.Ed.
Mary Claire Kinney Beilamowicz, Ph.D., R.D.,
L.D., C.F.C.S.
Wanda Franklin, M.B.A.
Bill Griffin, M.D.
Judith Ann Headley, Ph.D.
Martha Rammel Hinman, Ed.D.
Sharon F. Robinson, Ph.D., M.S., R.D.
Rogene E. Tesar, Ph.D., R.D., L.D., C.M.R.T.
William W. Wong, Ph.D., M.S.

Advisory Committee Member(s) Absent:

Jan Hamilton, Ph.D., R.D., L.D.
Steven Michael Petak, M.D., J.D., F.A.C.E.
Jo B. Sparks-Parker, M.B.A.

Registered Guest(s):

Niti Goel, M.D., Proctor and Gamble
Camille Hemlock, M.D., MHMR
Greg Hoke, WYETH
Brenda Knowles, Dietician
Jacquie Shillis, SUMA
John Dorsey, Proctor and Gamble

TDH Staff Member(s) Present:

Gina Baber, BWH
Shannon Edson, BRC
Jeanette Hilsabeck, PLCD/MRT
Jan Hudson, BWH
Janet Lawson, M.D., BWH
Margaret C. Méndez BWH
Patrice Parma, BRC/LRT
Annette Riggio, OC
Jennifer Ryan, BWH

Welcome and Meeting Call to Order

Bill N. Griffin, M.D., Chair

The meeting was called to order by Chairman Bill Griffin.

Approval of Minutes

Bill N. Griffin, M.D., Chair

- The minutes of the April 20, 2001 meeting were approved with three corrections:
 - Page 5: HICFA corrected to HCFA; University of Houston corrected to University of Texas at Houston.
 - Page 6: contains one typographical error, the minutes were amended so that “members” will now read “member”.

Program Updates

First Fracture and Glucocorticoid Initiatives

Bill N. Griffin, M.D., Chair

- Dr. Bill Griffin stated that even though osteoporosis is preventable, the majority of adults who present with fractures and those on long-term corticosteroid therapy, both high-risk groups, are seldom evaluated and treated for osteoporosis. This problem will require a long-term effort from the committee to educate physicians and hospitals.



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Worksite Module Pilot Project

Judith Ann Headley, Ph.D.

- Dr. Judith Headley presented an overview of the Osteoporosis Educational Module for the Workplace. She reviewed the purpose of the project, which was to provide information on the prevention, detection, and treatment of osteoporosis to workers in the community. The module was tested in seven different locations ten different times in three different plant populations in Baytown, Texas, with a total of 202 participants, including 106 females and 96 males. 149 pre-tests were completed with a mean score of 69.3 %. 164 post-tests were completed with a mean score of 94.3 %, representing a mean score increase of 25 % between pre and post-tests. It was found in the post-tests that the module had been successful in increasing awareness of osteoporosis among the participants.

Workplace Study

Jacque Shillis, M.Ed.

- The Texas Department of Health contracted with SUMA to conduct a workplace study, which surveyed 14 large employers and six community partners. Ms. Jacquie Shillis explained that the goal of educating employees about prevention, detection and treatment of osteoporosis efforts will more likely succeed if the program addresses health concerns of Texas employers and materials are positioned and marketed as human resources and safety tools. The humorous audiotape that will serve as a prototype for a video to be developed for the workplace was discussed. Ms. Shillis explained that the script had been revised based upon field-testing. Professionals who reviewed the prototype were unanimous in their approval of the product and said they would use the video if it were developed. The committee discussed the acceptability of the health message from viewers. The employer would educate the employees by showing the video. The goal of the video is to address health issues of employees and to inform the younger population that osteoporosis is preventable.

Recommendations from these two parallel worksite studies were that the workplace is an important venue through which young, middle age, and older adults can be reached with a message about prevention and treatment of osteoporosis. It is an avenue for public education, even if the message about osteoporosis has to be tied in with back injury prevention, which is a major concern of most employers.

Bone Density Certification

Rogene E. Tesar, Ph.D., R.D., L.D., C.M.R.T.

- Jan Hudson reviewed the three issues that have been raised by advisory committee members in several different committee meetings. These issues are:
 - 1) Requiring that Medical Radiologic Technologists (MRT's), Limited Medical Radiologic Technologists (MRT's), and Non-Certified Technician (NCT's) operating the Dual-Energy X-ray Absorptiometry (DEXA) machine be certified by the American Association of Clinical Endocrinologists (AACE) or International Society for Clinical Densitometry (ISCD).
 - 2) Requiring that the American Association of Clinical Endocrinologists (AACE) or the International Society certify physicians who read bone densitometry tests for Clinical Densitometry (ISCD).
 - 3) Requiring mandatory and timely reporting of bone densitometry test results to the patient.



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- Ms. Hudson reported on who performs bone densitometry testing, the training requirements for each group and the purpose of hardship exemptions. Hardship exemptions were discussed and the committee members expressed the position that anyone performing bone densitometry tests be certified.
- Problems noted with the current requirements include:
 - Specific training on bone densitometry is not required.
 - Training is provided on use of the machine, not on the quality of the scan.
 - With ongoing turnover in staff at screening sites, training on bone densitometry is often lost.
- Members identified the following as key components:
 - Knowledge of x-ray.
 - Machine usage.
 - Positioning of patients.
- With reference to the issue requiring physicians who read bone densitometry test results to be certified by either AACE or ISCD, physicians are not certified by TDH, therefore another venue would need to be explored for this issue.
- Ms. Hudson asked committee members for direction regarding recommended action on bone densitometry certification. Ms. Hudson identified the various types of strategies that could be used to address certification including:
 - Administrative Rule change
 - Public awareness
 - Legislation
 - Change in professional certification
- Dr. Tesar asked that the requirements of the American Association of Clinical Endocrinologists (AACE) and International Society for Clinical Densitometry (ISCD) be presented at the next meeting.



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Strategic Plan

Bill N. Griffin, M.D., Chair

- The committee discussed the work group ideas and recommendations of the July 13, 2001 strategic planning workshop.

Child and Youth Work Group

RECOMMENDATION	COMMITTEE ACTION
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Recommendation 1:
Address Senate Bill 19.

(a) Working with the State Board of Education to promote mandating daily physical activity in elementary schools.
(b) Add an osteoporosis component to the coordinated school health program implementation requirement (2007).
These ideas were accepted by the committee. It was suggested that osteoporosis prevention be referred to as Good Bone Health and that the committee offer their support to promote physical activity and school health programs by possibly establishing a subcommittee for children and youth issues. The committee requests the name and address of the person in charge of Senate Bill 19 for the next meeting.

Recommendation 2:
Define target audience.

The committee stated that this would be included in previously discussed subcommittee on children.

Recommendation 3:
Promote different approach to school breakfast.

Committee member Ms. Roma Ball, former school principal, voiced concern that this issue is one best left to administrators to decide. The committee concurred.

Recommendation 4:
Provide information on bone health and health screening tools to health care providers.

Committee supports this recommendation and Dr. Griffin noted that this falls under the programs awareness component.



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Young Adult and Middle Age Work Group

RECOMMENDATION COMMITTEE ACTION

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| Recommendation 1:
Worksite wellness. | The group addressed worksite wellness and partnerships that could be developed with several employee organizations. This may be an area of awareness that the committee will pursue based upon the estimates to be obtained from vendors. The committee added that worksite education should include education on the importance of preventing fracture after the first fracture. |
| Recommendation 2:
Education for practitioners and other professionals. | Meeting the professional education component of our outreach campaign was discussed as a possible topic for the next summit. Dr. Griffin mentioned getting information to submit articles about glucocorticoids to medical journals for the specialists who treat this problem. The committee also commented that certification should be part of education for practitioners and other professionals. |
| Recommendation 3:
Availability of education about osteoporosis in community/partnerships. | The discussion began by members stating that more people are getting bone density tests as a result of word getting out to the public. This may tie in to our awareness campaigns for the next few years. |
| Recommendation 4:
Softbones.com web site. | The group decided that this was something that needed more research before any action is taken. |
| Recommendation 5:
Social marketing campaign. | Will fall under the worksite wellness initiative as a means to communicate the relevance of information regarding osteoporosis. |
| Recommendation 6:
Osteoporosis stamp. | Committee discussion centered on this being similar to the stamp that was done for breast cancer through the mammography group. Dr. Griffin stated that this would be more of a national initiative undertaken by the National Osteoporosis Foundation (NOF) and that if we decide to advocate for this we would need to network with other states such as New Jersey, Florida and Michigan and we would need a member to advance this. Ms. Wanda Franklin was involved with the development of the mammography stamp and she volunteered to contact the NOF about getting a postal stamp and develop a timeline so the subcommittee can go forward with this. |



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Mature Adult Work Group

- Dr. Sharon Robinson presented osteoporosis materials to the group:
 - Exercise: A Guide from the National Institute on Aging
 - Exercise Tape-National Institute on Aging
 - Quality of Life in Older Adults-Journal of Gerontology, October 2001
 - Increased Physical Activity Among Adults 50 and Older-National Blue Print

RECOMMENDATION COMMITTEE ACTION

Recommendation 1:
Standards of
care/professional
education.

This recommendation would come under both the certification issue and the professional education component of the summit planning.

Recommendation 2:
Fall prevention (holistic
view).

The group discussed incorporating a holistic approach to older adult health. Dr. Marty Hinman suggested encouraging the use of new walkers with wheels to encourage active walking. Hip protectors, which would provide protection in case of falls, were also discussed (for more information visit www.Hipsaver.com.) Dr. Griffin suggested that standards of health education should include certification for professionals.

Recommendation 3:
Development of
culturally appropriate
materials for minority
populations.

The committee recommended checking with NOF to see if this has been researched and if so, what the results of the research were. Wanda Franklin is working with owners and administrators of nursing homes in Texas on the issue of educating healthcare providers.

Recommendation 4:
Advocacy/Networking

The committee tabled the recommendation to develop an osteoporosis advocacy structure, comprised of one or more citizen groups.

Recommendation 5:
Empowerment of Seniors

The recommendation to empower mature Texans to take charge of osteoporosis fits under the umbrella of the awareness campaign and the summit.

Recommendation 6:
Evaluation/BRFSS

The Behavioral Risk Factor Surveillance Survey is a national survey and each state also has its own. TDH staff will check on what questions are currently asked relating to osteoporosis and will arrange for someone to attend the next committee meeting to explain the survey.



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Committee Priorities

After the committee had reviewed the recommendations of the three strategic planning meeting work groups, priorities for the next 18 months were chosen.

The committee came to a consensus in selecting first fracture/glucocorticoids, certification and worksite wellness as the three key objectives from the overall plan to work on for the remainder of FY02 and for FY03. Two of the priority areas (first fracture/glucocorticoid and certification) will be the focus of the upcoming summit.

Summit 2002

Rogene E. Tesar, Ph.D., R.D., L.D., C.M.R.T.

- Ms. Gina Baber presented bids submitted by seven Austin area hotels to host the Osteoporosis summit. The committee chose the Hyatt, Omni and Renaissance as its top three choices. The conference topics will be fracture and fall prevention and treatment. The subcommittee members are Mickey Bielamowicz, Judith Headley (tentative); Sharon Robinson; Rogene Tesar (lead) and will meet by teleconference to be arranged on designated Tuesdays at 3:00 p.m. Potential topics for discussion are glucocorticoids; prevention, treatment and diagnosis of fragility fractures; what constitutes a center of excellence for bone densitometry; the importance of physical therapists; and resources and educational materials. The subcommittee will attempt to contact Janet Besner as a possible keynote speaker. Target audience includes health professionals and healthcare providers.

TDH and Program Updates

Gina Baber

Process for vacancies

Currently the committee has five vacancies. A membership drive is being conducted to find people to fill two professional member vacancies and three consumer member vacancies. Retired professionals can become consumer members. The committee was asked for names of people who may be interested in applying.

Awareness campaign

Ms. Baber asked the committee for direction with expenditure of funds for awareness projects. She listed the six project areas that had begun in 2001. They are:

- Worksite Education Module: Includes the production of a worksite video and accompanying worksite material.
- Continuing Education Article for Texas Nurses Association Journal: Includes writing continuing education course for nurses.
- Distribution Network: Includes establishing a network to disseminate material to physicians and healthcare professionals.
- Awareness Campaign in Houston Asian Community: Includes translation of materials into Chinese and Vietnamese. Distribution of same to target the large Asian population in Houston.
- Tool Kit: Includes the actual kit for distribution of materials to physicians and healthcare providers.



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- Southern Living Magazine: Includes one or two ads targeting 45-55 year-old women.

The committee requested status of the Tool Kit, which should be ready for distribution at the Summit. They would like to see the kit at the May Advisory Committee meeting.

The committee will continue to explore ways to market the worksite module. A subcommittee was developed to keep this project going. Subcommittee lead is Jacquie Shillis; members are Judy Headley, Ph.D. and Jo Sparks-Parker, M.B.A.

Ms. Baber told the committee that funds are available in the Osteoporosis account with the Texas Health Foundation and asked members for suggestions on how best to utilize these funds. These funds were designated by donors as unrestricted educational funds. The group suggested using them for the summit.

Adjournment

Bill N. Griffin, M.D., Chair

The next meeting will be held on May 17, 2002. The summer meeting will be held on July 26, 2002.